

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Oregon Republican Party

ADDRESS (number and street)

2720 Commercial St SE #210

☐Check if different
than previously
reported. (ACC)

Salem

OR

97302

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00153031

3. IS THIS
REPORT☐NEW
(N)

OR

☒AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☒January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

1 2

0 1

2 0 0 5

through

1 2

3 1

2 0 0 5

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Charles S. Oakes

Signature of Treasurer

Electronically Filed by Charles S. Oakes

Date

0 2

1 6

2 0 0 6

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only							
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FEC FORM 3X
(Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Oregon Republican Party

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
1	2	0	1	2	0	0	5

To:

M	M	D	D	Y	Y	Y	Y
1	2	3	1	2	0	0	5

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2005		44386.96
(b) Cash on Hand at Beginning of Reporting Period	6387.83	
(c) Total Receipts (from Line 19)	18186.00	328641.32
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	24573.83	373028.28
7. Total Disbursements (from Line 31)	16464.23	364918.68
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	8109.60	8109.60
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	94463.76	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name
Oregon Republican Party

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
1	2	0	1	2	0	0	5

To:

M	M	D	D	Y	Y	Y	Y
1	2	3	1	2	0	0	5

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	5650.00	99845.50
(i) Itemized (use Schedule A)	12536.00	177304.03
(ii) Unitemized	18186.00	277149.53
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➤	0.00	0.00
(b) Political Party Committees	0.00	100.00
(c) Other Political Committees (such as PACs)	0.00	18186.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ➤	18186.00	277249.53
12. Transfers From Affiliated/Other Party Committees	0.00	17461.16
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	230.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	33700.63
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	33700.63
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	18186.00	328641.32
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	18186.00	294940.69

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		944.58	19526.77
(i) Federal Share.....			
(ii) Non-Federal Share.....		5352.62	109024.54
(b) Other Federal Operating Expenditures.....		1112.33	67731.14
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....		7409.53	196282.45
22. Transfers to Affiliated/Other Party Committees.....		0.00	15000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		0.00	3728.62
24. Independent Expenditure (use Schedule E)		0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....		0.00	0.00
26. Loan Repayments Made.....		0.00	0.00
27. Loans Made.....		0.00	0.00
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees		0.00	0.00
(b) Political Party Committees		0.00	0.00
(c) Other Political Committees (such as PACs)		0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))		0.00	0.00
29. Other Disbursements.....		0.00	2830.93
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share		0.00	0.00
(ii) "Levin" Share		0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds		9054.70	147076.68
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....		9054.70	147076.68
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..		16464.23	364918.68
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....		11111.61	255894.14

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	18186.00	277249.53
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	18186.00	277249.53
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	2056.91	87257.91
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2056.91	87257.91

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 23

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial) Mildred Architect Mailing Address 3102 SE Holgate Blvd # D320 City Portland State OR Zip Code 97202-3416 FEC ID number of contributing federal political committee. C Name of Employer Information Requested Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 200.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 60131.C86228 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">100.00</td> </tr> </table> Receipt	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	9		2	0	0	5	100.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
1	2		1	9		2	0	0	5																							
100.00																																
B. Full Name (Last, First, Middle Initial) William Bishop Mailing Address 6825 S.W. Raleighwood Ln. City Portland State OR Zip Code 97225-1924 FEC ID number of contributing federal political committee. C Name of Employer Information Requested Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 200.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 60131.C86345 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">150.00</td> </tr> </table> Receipt	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	8		2	0	0	5	150.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
1	2		2	8		2	0	0	5																							
150.00																																
C. Full Name (Last, First, Middle Initial) Leroy Cheney Mailing Address 1915 Westlake Lp City Newberg State OR Zip Code 97132 FEC ID number of contributing federal political committee. C Name of Employer Information Requested Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 700.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: 60131.C86283 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">500.00</td> </tr> </table> Receipt	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	0		2	0	0	5	500.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
1	2		2	0		2	0	0	5																							
500.00																																

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 23

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Robert Flowerree
Mailing Address 1322 SE Lava Drive

City State Zip Code
Milwaukie OR 97222-7417

FEC ID number of contributing
federal political committee.

C

Name of Employer
Flowerree Foundation

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 3 / 2 0 0 5

Transaction ID: 60131.C86187

Amount of Each Receipt this Period

100.00

Receipt

B. Full Name (Last, First, Middle Initial)
James Heaton
Mailing Address 2408 Rogue Valley Manor Dr

City State Zip Code
Medford OR 97504

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 9 / 2 0 0 5

Transaction ID: 60131.C86277

Amount of Each Receipt this Period

100.00

Receipt

C. Full Name (Last, First, Middle Initial)
*Mrs. R.B. Johnson
Mailing Address 265 W 20th Ave

City State Zip Code
Eugene OR 97405-2805

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 3 / 2 0 0 5

Transaction ID: 60127.C86168

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 23

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)

Jim Lynch

Mailing Address PO Box 350

City State Zip Code
Lakeview OR 97630-0123

FEC ID number of contributing federal political committee.

C

Name of Employer
Lynch & VandenbergOccupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 9 / 2 0 0 5

Transaction ID: 60131.C86373

Amount of Each Receipt this Period

100.00

Receipt

B. Full Name (Last, First, Middle Initial)

Kevin Mannix

Mailing Address 375 18th St NE

City State Zip Code
Salem OR 97301

FEC ID number of contributing federal political committee.

C

Name of Employer
SelfOccupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 7 / 2 0 0 5

Transaction ID: 60131.C86335

Amount of Each Receipt this Period

100.00

Receipt

C. Full Name (Last, First, Middle Initial)

William Markham

Mailing Address 1030 W Harvard Avenue

City State Zip Code
Roseburg OR 97470-2923

FEC ID number of contributing federal political committee.

C

Name of Employer
Information RequestedOccupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 3 / 2 0 0 5

Transaction ID: 60131.C86326

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 23

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Mrs. R.G. Miller
Mailing Address 8400 SW Fairway DR

City State Zip Code
Portland OR 97225

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 9 / 2 0 0 5

Transaction ID: 60131.C86273

Amount of Each Receipt this Period

100.00

Receipt

B. Full Name (Last, First, Middle Initial)
Robert Neighbor
Mailing Address 2130 SW Jefferson St #315

City State Zip Code
Portland OR 97201

FEC ID number of contributing
federal political committee.

C

Name of Employer
RW Neighbor & Col

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 5

Transaction ID: 60131.C86412

Amount of Each Receipt this Period

200.00

Receipt

C. Full Name (Last, First, Middle Initial)
Thomas ORourke
Mailing Address 742 Fairway Court

City State Zip Code
Ashland OR 97520

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 2 / 2 0 0 5

Transaction ID: 60127.C86109

Amount of Each Receipt this Period

50.00

Receipt

SUBTOTAL of Receipts This Page (optional)

350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 23

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)

Lloyd Rhinhart

Mailing Address PO Box 658

City State Zip Code
Pilot Rock OR 97868

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Rancher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 2 / 2 0 0 5

Transaction ID: 60131.C86313

Amount of Each Receipt this Period

100.00

Receipt

B. Full Name (Last, First, Middle Initial)

Helen Scott

Mailing Address 346 Bickford Drive

City State Zip Code
Grants Pass OR 97527

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Book store owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

860.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 1 / 2 0 0 5

Transaction ID: 60131.C86309

Amount of Each Receipt this Period

100.00

Receipt

C. Full Name (Last, First, Middle Initial)

John and Nancy Todd

Mailing Address 15515 NW Norwich

City State Zip Code
Beaverton OR 97006

FEC ID number of contributing
federal political committee.

C

Name of Employer
Todd Construction

Occupation
Builder

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 5 / 2 0 0 5

Transaction ID: 60127.C86052

Amount of Each Receipt this Period

200.00

Receipt

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 23

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Dennis Tooley
Mailing Address 2440 NW Williams Loop

City State Zip Code
Redmond OR 97756-9198

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 4 / 2 0 0 5

Transaction ID: 60127.C86152

Amount of Each Receipt this Period

50.00

Receipt

B. Full Name (Last, First, Middle Initial)
Marvin Torbenson
Mailing Address 805 NE 90th Avenue

City State Zip Code
Portland OR 97220-5736

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 2 / 2 0 0 5

Transaction ID: 60127.C86101

Amount of Each Receipt this Period

100.00

Receipt

C. Full Name (Last, First, Middle Initial)
H. Stewart Tremaine
Mailing Address 2545 SW Terwilliger Blvd #610

City State Zip Code
Portland OR 97201

FEC ID number of contributing
federal political committee.

C

Name of Employer
Davis, Wright, Tremaine

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 3 / 2 0 0 5

Transaction ID: 60131.C86185

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 23

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

Full Name (Last, First, Middle Initial)

A. Jack & Suzanne Witucki

Mailing Address 186 Morninglight Dr

City State Zip Code
 Ashland OR 97520

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 7 / 2 0 0 5

Transaction ID: 60127.C86068

Amount of Each Receipt this Period

100.00

Receipt

Full Name (Last, First, Middle Initial)

B. Donna* Woolley

Mailing Address PO Box 43

City State Zip Code
 Drain OR 97435-0043

FEC ID number of contributing
federal political committee.

C

Name of Employer
Eagles View Management

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

13500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 6 / 2 0 0 5

Transaction ID: 60127.C86059

Amount of Each Receipt this Period

3000.00

Receipt

Full Name (Last, First, Middle Initial)

C. Janice Yaune

Mailing Address P.O. Box 86

City State Zip Code
 Scappoose OR 97056

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 2 9 / 2 0 0 5

Transaction ID: 60131.C86372

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional)

3200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 23

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)

Leo Zupan

Mailing Address 1115 Barrington Cir

City State Zip Code
 Ashland OR 97520

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Real Estate Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 1 9 / 2 0 0 5

Transaction ID: 60131.C86250

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional)

100.00

TOTAL This Period (last page this line number only)

5650.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 14 / 23

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

Full Name (Last, First, Middle Initial)

A. Key bank

Mailing Address 1500 Edgewater St NW

City Salem State OR Zip Code 97304-

Purpose of Disbursement
AUTHNET-CTS CREDIT CARD FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60131.E11868

Date of Disbursement

12 / 31 / 2005

Amount of Each Disbursement this Period

68.45

AUTHNET-CTS CREDIT CARD
FEES

B. Key bank

Mailing Address 1500 Edgewater St NW

City Salem State OR Zip Code 97304-

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60131.E11867

Date of Disbursement

12 / 31 / 2005

Amount of Each Disbursement this Period

90.00

BANK FEE

C. Pitney Bowes Credit Corp

Mailing Address P. O. Box 85460

City Louisville State KY Zip Code 40285-5460

Purpose of Disbursement
POSTAGE MACHINE LEASE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60131.E11872

Date of Disbursement

12 / 08 / 2005

Amount of Each Disbursement this Period

277.96

POSTAGE MACHINE LEASE

SUBTOTAL of Disbursements This Page (optional)

436.41

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 15 / 23

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

Full Name (Last, First, Middle Initial)

A. Pitney Bowes Credit Corp

Mailing Address P. O. Box 85460

City Louisville State KY Zip Code 40285-5460

Purpose of Disbursement
POSTAGE MACHINE LEASE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60131.E11873

Date of Disbursement

12 / 14 / 2005

Amount of Each Disbursement this Period

277.96

POSTAGE MACHINE LEASE

Full Name (Last, First, Middle Initial)

B. Pitney Bowes Credit Corp

Mailing Address P. O. Box 85460

City Louisville State KY Zip Code 40285-5460

Purpose of Disbursement
POSTAGE MACHINE LEASE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60131.E11874

Date of Disbursement

12 / 21 / 2005

Amount of Each Disbursement this Period

277.96

POSTAGE MACHINE LEASE

Full Name (Last, First, Middle Initial)

C. Pitney Bowes Purchase Power

Mailing Address PO Box 856042

City Louisville State KY Zip Code 40285-

Purpose of Disbursement
POSTAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60131.E11869

Date of Disbursement

12 / 01 / 2005

Amount of Each Disbursement this Period

120.00

POSTAGE

SUBTOTAL of Disbursements This Page (optional)

675.92

TOTAL This Period (last page this line number only)

1112.33

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 16 / 23

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

Full Name (Last, First, Middle Initial)

A. Key bank

Mailing Address 1500 Edgewater St NW

City Salem State OR Zip Code 97304-

Purpose of Disbursement
FEA PAYROLL TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60131.E11865

Date of Disbursement

12 / 01 / 2005

Amount of Each Disbursement this Period

1242.88

FEA PAYROLL TAXES

B. Key bank

Mailing Address 1500 Edgewater St NW

City Salem State OR Zip Code 97304-

Purpose of Disbursement
FEA PAYROLL TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60131.E11866

Date of Disbursement

12 / 15 / 2005

Amount of Each Disbursement this Period

1242.88

FEA PAYROLL TAXES

C. Amy Langdon

Mailing Address 2830 Foxhaven Dr S

City Salem State OR Zip Code 97306-

Purpose of Disbursement
FEA PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60131.E11863

Date of Disbursement

12 / 01 / 2005

Amount of Each Disbursement this Period

2069.96

FEA PAYROLL

SUBTOTAL of Disbursements This Page (optional)

4555.72

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 17 / 23

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

Full Name (Last, First, Middle Initial)

A. Amy Langdon

Mailing Address 2830 Foxhaven Dr S

City Salem State OR Zip Code 97306-

Purpose of Disbursement
FEA PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60131.E11864

Date of Disbursement

12 / 15 / 2005

Amount of Each Disbursement this Period

2069.95

FEA PAYROLL

Full Name (Last, First, Middle Initial)

B. Oregon Department of Revenue

Mailing Address PO Box 14800

City Salem State OR Zip Code 97309-

Purpose of Disbursement
FEA PAYROLL TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60131.E11870

Date of Disbursement

12 / 01 / 2005

Amount of Each Disbursement this Period

269.00

FEA PAYROLL TAXES

Full Name (Last, First, Middle Initial)

C. Oregon Department of Revenue

Mailing Address PO Box 14800

City Salem State OR Zip Code 97309-

Purpose of Disbursement
FEA PAYROLL TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60131.E11871

Date of Disbursement

12 / 15 / 2005

Amount of Each Disbursement this Period

269.00

FEA PAYROLL TAXES

SUBTOTAL of Disbursements This Page (optional)

2607.95

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 18 / 23

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

Full Name (Last, First, Middle Initial)

A. Cindy Wolfe

Mailing Address 595 Rockwood St SE

City Salem State OR Zip Code 97306-1756

Purpose of Disbursement
FEA PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60131.E11861

Date of Disbursement

12 / 01 / 2005

Amount of Each Disbursement this Period

945.52

FEA PAYROLL

Full Name (Last, First, Middle Initial)

B. Cindy Wolfe

Mailing Address 595 Rockwood St SE

City Salem State OR Zip Code 97306-1756

Purpose of Disbursement
FEA PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60131.E11862

Date of Disbursement

12 / 15 / 2005

Amount of Each Disbursement this Period

945.51

FEA PAYROLL

SUBTOTAL of Disbursements This Page (optional)

1891.03

TOTAL This Period (last page this line number only)

9054.70

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 19 / 23

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Oregon Republican Party**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
FL&SNature of Debt (Purpose):
telemarketing

Mailing Address 7320 N Dreamy Draw Dr

City State ZIP Code
Phoenix AZ 85020-5212

Outstanding Balance Beginning This Period

22811.30

Transaction ID: 4LSE11265

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

22811.30

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Direct Mail Systems, IncNature of Debt (Purpose):
Direct mail

Mailing Address 12450 Automobile Boulevard

City State ZIP Code
Clearwater FL 34622-

Outstanding Balance Beginning This Period

2564.49

Transaction ID: 6LSE8347

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2564.49

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Lightwave Electric LightwaveNature of Debt (Purpose):
Phone Bill

Mailing Address PO Box 20553

City State ZIP Code
Rochester NY 14602-

Outstanding Balance Beginning This Period

348.88

Transaction ID: 1LSE11632

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

348.88

1) SUBTOTALS This Period This Page (optional).....

25724.67

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 20 / 23

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Oregon Republican Party**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Pitney Bowes Purchase PowerNature of Debt (Purpose):
Postage

Mailing Address PO Box 856042

City State ZIP Code
Louisville KY 40285-

Outstanding Balance Beginning This Period

1016.99

Transaction ID: 5LS60131.E11869

Amount Incurred This Period

0.00

Payment This Period

120.00

Outstanding Balance at Close of This Period

896.99

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Eagle TeleconferencingNature of Debt (Purpose):
phone bill

Mailing Address 207 West Washington Street

City State ZIP Code
Rushville IL 62681-

Outstanding Balance Beginning This Period

473.30

Transaction ID: 2LSE11559

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

473.30

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
AT&T WirelessNature of Debt (Purpose):
Cell phone bills

Mailing Address PO Box 79075

City State ZIP Code
Phoenix AZ 85062-

Outstanding Balance Beginning This Period

67180.90

Transaction ID: 3LSE11336

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

67180.90

1) SUBTOTALS This Period This Page (optional).....

68551.19

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 21 / 23

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Connolly & Goldian

Nature of Debt (Purpose):
legal fees

Mailing Address PO Box 3095

City State ZIP Code
Salem OR 97302-

Outstanding Balance Beginning This Period

187.90

Transaction ID: LSE11533

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

187.90

1) **SUBTOTALS** This Period This Page (optional)..... ▶

187.90

2) **TOTALS** This Period (last page this line number only)..... ▶

94463.76

3) **TOTALS OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2)** and **3)** and carry forward to appropriate line of Summary Page (last page only) ▶

METHOD OF ALLOCATION FOR:

- **SHARED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **SHARED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)**(Seperate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)

Oregon Republican Party

USE ONLY ONE SECTION, A or B**A. State and Local Party Committees****Fixed Percentage (select one)**

- _____ Presidential-Only Election Year (28% Federal)
- _____ Presidential and Senate Election Year (36% Federal)
- _____ Senate-Only Election Year (21% Federal)
- X Non-Presidential and Non-Senate Election Year (15% Federal)

B. Separate Segregated Funds and Nonconnected Committees**Flat Minimum Federal Percentage**If the committee will allocate using the flat minimum percentage of 50% federal funds, check ☐**or**

If the committee is spending more than 50% federal funds, indicate ratio below

Federal..... %Nonfederal..... %

This ratio applies to (check all that apply):

Administrative ☐ Generic Voter Drive ☐ Public Communications Referencing Party Only ☐

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 23 / 23

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
 LifeWise

Mailing Address

815 SW Bond St

City

State

Zip Code

Bend

OR

97702-

Purpose of Disbursement:
 health insurance

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

121389.19

Date

M M / D D / Y Y Y Y

1 2 / 0 9 / 2 0 0 5

Transaction ID: H460131.E11877

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

44.58

252.62

297.20

B. Full Name (Last, First, Middle Initial)
 Certified Property

Mailing Address

PO Box 269

City

State

Zip Code

Salem

OR

97308-0269

Purpose of Disbursement:
 office rent - December partial

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

125889.19

Date

M M / D D / Y Y Y Y

1 2 / 2 3 / 2 0 0 5

Transaction ID: H460131.E11875

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

675.00

3825.00

4500.00

C. Full Name (Last, First, Middle Initial)
 Certified Property

Mailing Address

PO Box 269

City

State

Zip Code

Salem

OR

97308-0269

Purpose of Disbursement:
 office rent - December in full

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

127389.19

Date

M M / D D / Y Y Y Y

1 2 / 3 1 / 2 0 0 5

Transaction ID: H460131.E11876

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

225.00

1275.00

1500.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

944.58

5352.62

6297.20

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

944.58

5352.62

6297.20